

APPLICATION DATA SHEET**APPLICATION INFORMATION**

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|---|----------------------------------|
| Application Type:: | Regular |
| Subject Matter:: | Utility |
| CD-ROM or CD-R?:: | None |
| Number of CD disks:: | |
| Number of copies of CDs:: | |
| Sequence submission?:: | None |
| Computer Readable Form (CRF)?:: | No |
| Number of copies of CRF:: | |
| Title:: | Water-soluble Meloxicam Granules |
| Attorney Docket Number:: | 1/1405US |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Total Drawing Sheets:: | 0 |
| Small Entity?:: | No |
| Petition included?:: | No |
| Secrecy Order in Parent Appl.?:: | No |

APPLICANT INFORMATION

| | |
|--|---------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | Germany |
| Status:: | Full Capacity |
| Given Name:: | Stefan |
| Family Name:: | HENKE |
| City of Residence:: | Gau-Odernheim |
| State or Province of Residence:: | |
| Country of Residence:: | Germany |
| Street of mailing address:: | Neugasse 22 |
| City of mailing address:: | Gau-Odernheim |
| State or Province of mailing address:: | |
| Country of mailing address:: | Germany |
| Postal or Zip Code of mailing address:: | 55239 |

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Germany
Status:: Full Capacity
Given Name:: Martin
Middle Name:: Andreas
Family Name:: FOLGER
City of Residence:: Ingelheim
State or Province of Residence::
Country of Residence:: Germany
Street of mailing address:: Eisenacher Strasse 18
City of mailing address:: Ingelheim
State or Province of mailing address::
Country of mailing address:: Germany
Postal or Zip Code of mailing address:: 55218

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Germany
Status:: Full Capacity
Given Name:: Jens
Family Name:: SCHMALZ
City of Residence:: Hueffelsheim
State or Province of Residence::
Country of Residence:: Germany
Street of mailing address:: Im Obstgarten 4
City of mailing address::
State or Province of mailing address:: Hueffelsheim
Country of mailing address:: Germany
Postal or Zip Code of mailing address:: 55595

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Germany
Status:: Full Capacity

Given Name:: Diana
Family Name:: KEILHOFER
City of Residence:: Mainz
State or Province of Residence ::
Country of Residence:: Germany
Street of mailing address:: Kaiser-Wilhelm Ring 89
City of mailing address:: Mainz
State or Province of mailing address::
Country of mailing address:: Germany
Postal or Zip Code of mailing address:: 55118

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Germany
Status:: Full Capacity
Given Name:: Hans-Juergen
Family Name:: KROFF
City of Residence:: Schoeneberg
State or Province of Residence::
Country of Residence:: Germany
Street of mailing address:: Soonwaldstrasse 11
City of mailing address:: Schoeneberg
State or Province of mailing address::
Country of mailing address:: Germany
Postal or Zip Code of mailing address:: 55444

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Germany
Status:: Full Capacity
Given Name:: Nina
Family Name:: born DEEG
Name Suffix::
City of Residence:: Windesheim
State or Province of Residence::

Country of Residence:: Germany
Street of mailing address:: Im Taubentrunk 11
City of mailing address:: Windesheim
State or Province of mailing address::
Country of mailing address:: Germany
Postal or Zip Code of mailing address:: 55452

DOMESTIC PRIORITY INFORMATION

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|------------------|--------------------|----------------------|----------------------|
| This Application | Non-Provisional of | 60/ | 10/02/2003 |

FOREIGN PRIORITY INFORMATION

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|------------------|--------------------|
| DE | 102 50 081 | October 25, 2002 | Yes |

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 28501

REPRESENTATIVE INFORMATION

Representative Customer Number:: 28501

ASSIGNEE INFORMATION

Assignee name:: Boehringer Ingelheim Vetmedica GmbH
Street of mailing address:: Binger Strasse 173
City of mailing address:: Ingelheim
State or Province of mailing address::
Country of mailing address:: Germany
Postal or Zip Code of mailing address:: 55216